

RE: Pulp and Paper Industry Subpart S Compliance Reporting Guidelines

Dear :

The DEP Bureau of Air Quality has put together draft guidelines and reporting forms to help facilities comply with the National Emission Standards for Hazardous Air Pollutants for the Pulp and Paper Industry, Subpart S of 40 CFR Part 63. This guidance takes the position that the semi-annual Startup, Shutdown and Malfunction (SSM) Report and the Excess Emission and Continuous Monitoring System (CMS) Performance Report require similar information to be reported and have combined the requirements into two report forms. Attached are three draft documents that we would like you to consider for reporting Subpart S requirements:

- Instructions for Subpart S Reporting;
- A form for Subpart S Excess Emission, CMS Performance, SSM reporting; and
- Semi-annual Summary Report Form for Subpart S Excess Emission and Monitoring System Performance.

Combined, these forms should provide the information that Subpart S requires to be reported. Both forms are due on a semi-annual basis. The Air Bureau would like to have feedback from your company before these guidelines are finalized. Our goal is to have uniform reports that are clear, easy to understand, provide useful information and still meet the regulatory requirements. Seeing that it may take a while to get feedback, and the time for semi-annual reports is approaching, we invite you to use these draft forms for the coming reports to satisfy Subpart S. Electronic versions of the forms can be downloaded from the Air bureau Compliance Web site at <http://www.state.me.us/dep/air/compliance/>.

Sincerely

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Bureau of Air Quality

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**INSTRUCTIONS FOR USE OF THE PULP AND PAPER SUBPART S
SEMI-ANNUAL REPORT FORMS**

1) General

- a) These guidelines are intended to supplement and not replace requirements of 40 CFR Part 63 and other applicable laws and regulations.*
- b) Report forms must include the name, title and signature of the responsible person who is certifying the accuracy of the report and date of the report.*

2) PULP AND PAPER SUBPART S EXCESS EMISSION, SSM, AND CMS PERFORMANCE REPORT (PPSUBS Form1)

- a) Excess Emission, SSM (chronologically by control system)*
 - i) Identify the system;
 - ii) Include the start time and date, end time and date and the duration of for:
 - (1) each event of excess emissions;
 - (2) each period when a control device was inoperable and emission source was operating; and
 - (3) each period when a parameter monitor did not meet the maximum or minimum levels established during the initial or subsequent performance testing (for both SSM and Non-SSM events).;
 - iii) Describe the nature and cause of any malfunction, if known;
 - iv) Describe the corrective action taken or preventative measures adopted. Indicate whether the SSM plan was followed, Y or N (☒) and cite the section or code of the plan. Make note if claimed as part of SSM allowance (**S**), or if claimed as part of % allowance(**P**):

b) CMS Performance Problems (chronologically by control system)

- i) Identify the control system and monitor;
- ii) Identify all averaging periods when insufficient CMS or parameter data was collected for a valid sample. Include the start time and date, end time and date and the duration of the event;
- iii) Describe nature and cause of any malfunction, if known; and
- iv) Describe the corrective action taken or preventative measures adopted. Indicate whether the SSM plan was followed, Y or N (☒) and cite the section or code of the plan. Quarterly reports or other correspondence can be referenced as part of this report.
- v) Events not consistent with the SSM Plan must be reported within 2 working days and followed-up with a letter in 7 days unless other arrangements are made [40 CFR Part 63.6(e)(3)(iv)].

3) SEMI-ANNUAL SUMMARY REPORT: PULP AND PAPER SUBPART S EXCESS EMISSION AND MONITORING SYSTEM PERFORMANCE
(PPMACT1 Form2)

a) As required in 40 CFR Part 63.10(e)(3)(vi), submit a Summary Report using a separate form for each of the control systems as applicable.

- i) Identify the emission source (LVHC, HVLC, bleach plant control, foul condensate steam stripper, biological treatment, condensate collection system) with a ☒.
- ii) Complete all information required on the form; and

2) OTHER PULP AND PAPER SUBPART S REPORTING REQUIREMENTS
(no forms attached)

- a) The required daily sampling at the biological treatment, the HVLC and the LVHC bypass vent monitors shall be considered CMS and included in the above report forms as appropriate.***
- b) The quarterly and annual testing at the biological treatment systems and the annual LDAR testing shall be considered performance tests and thus subject to the existing Air Emission Compliance Test Protocol. The results of these tests shall be included in the appropriate quarterly report.***

- c) The monthly LDAR and hard-piping inspection records shall be kept on site and available for inspection. The results of these inspections shall be included in the appropriate quarterly report.***
- d) All CMS must be operated except for system breakdowns, out-of-control periods, repairs, maintenance periods, calibration checks, and zero (low-level) and high-level calibration drift adjustment.***
- e) Reports shall be sent to the appropriate Maine DEP regional office with copies to EPA Region I. Copies of the summary forms shall be forwarded to the Bureau of Air Quality in Augusta to the attention of Kurt Tidd.***

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PULP AND PAPER SUBPART S EXCESS EMISSION, SSM, AND CMS PERFORMANCE REPORT

SYSTEM (List chronologically by System. Total the percent of claimed allowances in the duration column at the end of each system section i.e. 1% for LVHC exclude SSM, 4% for HVLC exclude SSM, 10% for steam stripper include SSM)	DATE AND TIME EVENT STARTED	DATE AND TIME EVENT ENDED	DURATION	NATURE OF SSM OR EXCESS EMISSION (parameter levels)	CORRECTIVE ACTION, SSM FOLLOWED: Y / N (Cite section or code of SSM Plan) <ul style="list-style-type: none"> make note "S" if claimed as part of SSM Allowance make note "P" if claimed as part of a % allowance 	Y E S <input checked="" type="checkbox"/>	N O <input checked="" type="checkbox"/>

I CERTIFY THAT TO THE BEST OF MY KNOWLEDGE THE INFORMATION PROVIDED IN THIS REPORT IS COMPLETE AND ACCURATE.

RESPONSIBLE OFFICAL _____ TITLE _____

SIGNATURE _____ DATE _____

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SEMI-ANNUAL SUMMARY REPORT

PULP AND PAPER SUBPART S EXCESS EMISSION AND MONITORING SYSTEM PERFORMANCE

System: (check one)	<input type="checkbox"/>	LVHC	<input type="checkbox"/>	HVLC	<input type="checkbox"/>	Bleach Plant	<input type="checkbox"/>	Foul Condensate Collection	<input type="checkbox"/>	Sulfite Mill Scrubber	<input type="checkbox"/>	Steam Stripper	<input type="checkbox"/>	Biological Treatment
Systems control/monitor methanol (chlorine for Bleach Plant)														
Reporting Period Dates:		From:								To:				
Company Name & License #										Emission Limitation				
Mailing Address										Monitor & Primary Components				
										Date of Latest Audit				
Process Unit(s) Description										Total Source operating time in reporting period *				
Excess Emission Data Summary ¹								CMS Performance Summary ¹						
1. Duration of excess emissions in reporting period due to ² :								1. CMS downtime in reporting period due to:						
a. Startup/shutdown								a. Monitor equipment malfunctions						
b. Control equipment problems								b. Non-monitor equipment malfunctions						
c. Process problems								c. Quality assurance calibration						
d. Other known causes								d. Other known causes						
e. Unknown causes								e. Unknown causes						
2. Total duration of excess emission								2. Total CMS Downtime						
3. $\frac{\text{Total duration of excess emission}}{\text{Total source operating time}} \times 100$				%				3. $\frac{\text{Total CMS down time}}{\text{Total source operating time}} \times 100$				%		
Describe any changes since last semi-annual report for CMS, process or controls: Use extra sheet of paper if necessary.														

1. Record time in **minutes**.

2. This includes all periods of excess emissions minus the appropriate percentage and SSM allowances.

A copy of the summary report form and the excess emission report shall be forwarded to the Bureau of Air Quality in Augusta and the appropriate DEP and EPA Regional Offices.

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RESPONSIBLE OFFICIAL

TITLE

SIGNATURE

DATE